

Celebrating 15 Years 1986-2001

Penn Center West One, Suite 229 • Pittsburgh, Pennsylvania 15276

August 17, 2001

Kimberly Topper Food and Drug Administration, CDER, Advisors and Consultants Staff, HFD-21 5600 Fishers Lane Rockville, MD 20857

Dear Ms. Topper:

I am writing on behalf of the Board of Directors of the Hospice & Palliative Nurses Association (HPNA) to urge very careful consideration surrounding any action that might restrict the availability of OxyContin.

Every day, thousands of patients with unrelieved pain are referred to hospice or palliative care programs across the nation. OxyContin, like other sustained released opioids, is a critical element in the appropriate management of pain, especially cancer pain. OxyContin, available in multiple strengths, has become one of the standard oral medications offered to patients in pain. It is prescribed in increasing amounts for the simple reasons that it is cost effective and it works.

In the past decade, hospice and palliative nurses have been among the leaders in health care contributing to the extensive efforts to promote more effective pain management. A key strategy to improving pain management has been to reduce or remove professional barriers to the use of opioids. Any action to further limit the availability of OxyContin, either by decreasing production or require any sort of pre-authorization for the medication will undoubtedly serve to inhibit effective pain management. The result would be unnecessary and unrelieved pain.

The HPNA Board of Directors wholeheartedly supports the prevention of drug diversion and abuse at all levels in our society. We recognize that the reports of abuse of OxyContin are important legal and social issues that must be addressed. We urge you to0 seek solutions that will permit physicians to prescribe the appropriate pain medication without increased barriers.

The HPNA membership reflects almost 4,000 professional nurses across the nation.

Sincerely,

Judy Lentz Judy Lentz, RN Executive Director